

 HAWAII HEALTH SYSTEMS CORPORATION <i>"Touching Lives Everyday"</i>	Department: Corporate Finance	Policy No.: PUR 0022
	Issued by: Kelley C. Roberson COO/CFO	Revision No.: N/A
Policies and Procedures	Approved by: Thomas M. Driskill, Jr. President & CEO	Effective Date: November 1, 2006
		Supersedes Policy: N/A
Subject: <i>Vendor Visitation and Interaction Rules</i>		Page: 5 of 5

I. PURPOSE

- To establish regulations for vendors doing business at HHSC.
- To provide guidelines for facility personnel when interacting with vendors.
- To assure appropriate identification of all vendors visiting the HHSC.
- To minimize interruption of patient care and staff productivity.
- To improve the security of our patients, staff and property.
- To ensure that all vendor contacts are consistent with the HHSC policies.
- To specify a mechanism to enforce this policy.

II. POLICY: Vendors that conduct business at or with the Hawaii Health Systems Corporation (HHSC) will do so in accordance with HHSC policy guidelines. Facility personnel and staff of the HHSC shall interact with vendors in a manner that meets ethical standards, protects patient confidentiality, does not interfere with the process of patient care, and encourages appropriate, efficient and cost effective use of equipment, supplies, and pharmaceuticals within HHSC. This policy shall be the responsibility of all staff to monitor and assure that vendors are compliant with these guidelines.

III. DEFINITIONS:

Vendor - any representative of a manufacturer or company who visits the HHSC for the purpose of soliciting, marketing, or distributing information regarding the use of medications, products, equipment and services. Specified portions of the policy do not apply to vendors whose non-pharmaceutical products are already in place in the institution when the purpose of the visit is specifically to provide information to HHSC personnel concerning the implementation and appropriate use of their non-pharmaceutical product.

Facility Personnel and Staff - for the purposes of this policy, any reference to personnel and staff also includes medical staff, all health care providers, students, volunteers and persons hired by the HHSC to perform work at or on HHSC behalf.

HHSC Hospitals and Health Center Sites - the buildings used by HHSC for inpatient or outpatient care, including any other HHSC owned or operated site at which clinical care is delivered.

IV. POLICY STANDARDS: Personnel and staff are expected to uphold the highest ethical standards in interactions with all vendors. All personnel is responsible for reporting violations of this policy to the Executive Director of Contract Management (808-733-4168) or to the Compliance Help Line (808-733-4189 locally or 1-888-733-4189 long distance).

V. PROCEDURE ACTIONS: Responsible Party/Action

A. General

1. Each facility at HHSC will have a designated check-in area for vendors. A person for whom this is their sole responsibility may perform the check-in function, or it may be incorporated into the existing responsibilities of an employee. Vendors are only permitted to visit personnel or staff by appointment.
2. All vendors are required to check- in at the designated area and receive an ID badge before proceeding to a department.
3. Vendors who show up at departments without checking in at the designated area and without valid identification, will be asked to leave the facility, or return to the designated area to check- in and receive proper identification.
4. If a vendor does not adhere to this policy, HHSC Contract Management and Material Management will take action as appropriate, such as requesting a replacement vendor or limiting new business with the HHSC.
5. Notices explaining the vendor policy will be posted at each entrance to HHSC facilities. The notices will indicate the designated entrance and check-in area for that facility.
6. The HHSC reserves the right to limit the number of vendors that any single company has visiting HHSC facilities.
7. Vendors visiting HHSC for the sole purpose of initiating and monitoring approved research studies are exempt from this policy on those occasions only.
8. All vendors who, in the course of providing necessary business services to HHSC, come in contact with patients or have access to identifiable health information must sign a Business Associate Agreement (available from the HHSC Legal Department) and abide by the HHSC Confidentiality of Patient Information Policy.

B. Pre-Visit

1. Upon a vendor's first visit to the HHSC, they shall schedule an appointment with the HHSC facility Contracts Manager and or facility Material Manager. At that appointment, the vendor will be informed of the organization's solicitation(s) guidelines.
2. Vendors must schedule an appointment with individuals or departments prior to being allowed to visit.

3. The departments will be responsible for notifying the vendor of the check-in policy and giving them specific directions as to where to check-in.

C. Pharmacy – Specific: All new pharmaceutical vendors who call on HHSC facilities must also report to the Department of Pharmacy Services to register on their initial visit. During registration, the vendor must provide contact information for himself/herself as well as his/her supervisor. The Department of Pharmacy Services will provide the vendor with the pertinent HHSC policies and guidelines and they will be required to sign a statement confirming that they have received, reviewed, and agree to comply with the policies and guidelines.

D. Day of Appointment

1. At check in, the vendor must register by signing in on the vendor registry log kept at that check-in area. Vendors will register their name, company name, date and time and the individual or department being visited.
2. The vendor will be issued a specific ID identifying them as a vendor. This ID will be temporary, unique in color, valid for one day only, and specify the department they are visiting. Vendors are to wear the ID badge clearly displayed at all times while in HHSC facilities.
3. At check-in, the designated person will contact the department that the vendor is visiting and get approval to allow the vendor to proceed. Vendors may only visit those departments and personnel when there is a prearranged appointment. Vendors may NOT visit with personnel, staff, or Executive Officers or call on departments without a prearranged appointment.
4. If vendor visits have to occur at times other than during regular business hours, the department must notify the vendor check-in area and obtain in advance a temporary vendor badge for the representative.

E. Access

1. Vendors are restricted in access to: physicians' offices, Contract Managers and Material Managers offices, Pharmacy administrative and Material Services offices (all by appointment only), conference rooms (by invitation only), and public areas.
2. Under most circumstances, vendors are prohibited from entering patient care areas within the hospitals and health centers including the: Emergency Department, the Operating Rooms, Medical Procedures Unit, Cardiac Study Unit, patient care units, outpatient clinics, clinic staff rooms, waiting rooms, and hallways, Pharmacy dispensing areas and the Material Services warehouse. An exception to this is a situation in which a vendor is required for training on new equipment or devices already purchased by HHSC, setting up such equipment, or similar activities associated with a contractually agreed to business purpose associated with new technology or devices. These cases must be approved by the appropriate director/chair/division or service chief and are subject to the confidentiality protections in the contract language and the Business Associate Agreement.
3. Vendors are prohibited from attending any conference where patient specific information or quality assurance activities are being discussed (see confidentiality).
4. Vendors shall only use elevators designed for public use.
5. Vendors may not use the HHSC paging system to contact personnel or staff unless specifically requested by the personnel or staff member.

6. Vendors are not to place (or ask staff to place) information in mailboxes of any HHSC personnel or staff unless specifically requested by the individual personnel or staff.

F. Displays

1. Vendors are not permitted to display products or product information within HHSC.

G. Promotional Activities

1. Cash or other incentive programs are strictly prohibited at the HHSC.
2. No personal gifts of any kind from vendors to personnel or staff are permitted.
3. Vendors are not permitted to distribute, post or leave any type of printed or handwritten material, advertisements, signs or other such promotional materials anywhere on the HHSC premises. Unsolicited materials may not be provided to clinicians; personnel or staff must explicitly request any promotional or informational material provided by a vendor.
4. Distribution of vendor patient educational material that may be useful to our patients should be left at the appropriate department. Either the department or the Patient Education must review all educational information before it is distributed to patients or families. Vendors are strictly prohibited from providing educational material of any type directly to patients or from leaving them in areas accessible to patients.
5. Only pricing/cost information that has been approved by HHSC Contract Management and Material Management may be discussed with clinicians. Absolutely, no contracts may be presented to clinical staff; all contracts must be routed through Contract Management and Material Management.
6. Promotion of drugs against HHSC restrictions, drug utilization guidelines, or clinical guidelines/initiatives is prohibited. Non-formulary drugs or drugs not on the HHSC Preferred Drug List may only be discussed if the pharmaceutical vendor fully discloses this status to the HHSC personnel physician or staff member. Pharmaceutical vendors who do discuss such agents without an appropriate disclosure will be immediately suspended from visiting HHSC sites pending review of the event.
7. Pharmaceutical sales representatives may not distribute pre-printed prescription pads.

H. Confidentiality

1. Vendors shall not attend programs in which specific patients are discussed or when quality assurance or risk management issues are presented.
2. Preceptorship programs (programs for the education of pharmaceutical representatives) involving contact with, discussion of, or observation of individual patients, are prohibited unless approved in advance by the Medical Staff Office and the HHSC Legal Department.

I. Responsibility - Departments and Staff. All HHSC departments and staff are responsible for assuring that vendors interacting with our organization comply with this policy. Non-compliant vendors are to be immediately reported to the Executive Director of Contract Management (808-733-4168) or the Compliance Help Line (808-733-4189).

J. Security. Security may, at any time, request to inspect a vendor's identification badge. Vendors without proper identification badges will be escorted to the appropriate vendor check in area. Uncooperative vendors or those in violation of HHSC policies may be escorted off the premises.

K. Compliance

1. The Contract Manager and Material Manager shall thoroughly investigate any reported violations of this policy.
2. Vendors who fail to comply with HHSC requirements are subject to losing their business privileges at the HHSC, subject to applicable laws and regulations. The HHSC reserves the right to restrict the representative and the company they represent from HHSC property.
3. HHSC personnel and staff suspected of noncompliance with this policy will be reported to their supervisor for action. Depending on the severity of the situation, discipline up to and including discharge may be warranted.
4. The Contract Manager and Material Manager will report actions taken as a result of noncompliance to the facility CEO.

IV. APPLICABILITY: All HHSC facilities and HHSC Corporate staff.

V. REFERENCES: HRS Chapter 89 (State Ethics Code); Chapter 323F; chapter 103D.